

OBITUARY

JULIUS WAGNER VON JAUREGG, M.D., 1857–1940

AN APPRECIATION*

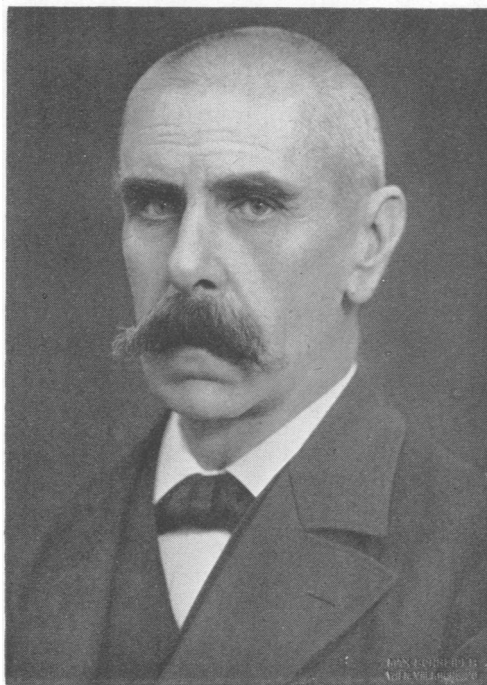
BY

W. D. NICOL

Royal Free Hospital, London

Julius Wagner von Jauregg was born at Wels in Upper Austria on March 7, 1857, and it is the centenary of his birth that we celebrate at this time. He became M.D. Vienna in 1880 and his first appointment was in experimental pathology and internal medicine at the University of Vienna. Bruetsch (1940), in an obituary notice on the death of Wagner von Jauregg on October 1, 1940, in his 84th year, tells us that it was not his original intention to become a psychiatrist. However, in 1883, he joined the psychiatric clinic at the University of Vienna and, in 1889, was appointed professor of neurology and psychiatry at the University of Graz, a post which he occupied till 1893, when he returned to Vienna as chief of the psychiatric department of the University. In the earlier years of his life, Wagner von Jauregg made several contributions to medical literature on physiological and pharmacological subjects: cretinism, myxoedema, and prevention of goitre were fields which claimed his attention. Bruetsch records, too, that his excellent judgment in matters of forensic psychiatry was recognized throughout Europe.

His name will best be remembered in connexion with his researches and his fight against general paralysis of the insane (G.P.I.), in recognition of



which he was awarded the Nobel prize in 1927, and in 1938 he received from New York one thousand dollars and a medal from the committee on research in syphilis. On reaching the age of 70, in 1927, a celebration in his honour was held in the old chapel of the psychiatric clinic of Vienna, which was then named the Wagner von Jauregg clinic.

To Bruetsch (1946) we are again indebted for the translation of a manuscript of an unpublished monograph on "The History of the Malaria Treatment of General Paralysis" by Wagner von Jauregg. As far back as 1887, he suggested that febrile disease deliberately produced might become a therapeutic agent for the treat-

ment of psychotic patients. To this end, malaria and erysipelas were considered for inoculation: the latter was chosen as being the lesser of two risks, but proved entirely unsatisfactory. In 1890, the discovery of Robert Koch's tuberculin, a new type of fever-producing agent, afforded a fresh opportunity for treatment of all types of mental patients: amongst them were a few cases of general paralysis, and the unusual occurrence of an apparent cure was observed. Treatment combined with mercury injections was instituted and some complete remissions were obtained, but relapses were frequent. A report to the International Medical Congress in Budapest was made in 1909, and the thesis that

* Invited article.

tuberculin therapy was the most promising treatment for G.P.I. was put forward, but psychiatrists ignored this fact. Subsequently, various vaccines were tried, as the tuberculin treatment was dangerous; typhoid vaccine, as the most reliable fever-producing agent, was employed and mercury was replaced by the newly discovered Salvarsan: permanent remissions were few and relapses many.

In 1917, thirty years after malaria was first suggested, Wagner von Jauregg returned to his original idea. Infective material was plentiful as hospitals were full of wounded soldiers returned from the Struma Valley in Macedonia. A minor casualty suffering from malaria had been admitted to one of Wagner von Jauregg's beds in error. "Should he be given quinine?" an assistant physician asked. "No", was his chief's reply, "this I regarded as a sign of destiny". On that day, June 14, 1917, three cases of general paralysis were inoculated by scarifying the skin with a few drops of the soldier's blood. So the era of malaria therapy, with its beneficial results, started, and five years later, in 1922, were inoculated the first cases of general paralysis in Great Britain. Malaria therapy became established and was recognized as being the most successful treatment for a disease which hitherto was regarded as fatal. In fact, malaria dominated the picture until the advent, in 1945, of the use of penicillin, which now has largely superseded malaria as a safer procedure.

In 1936, I visited the Wagner von Jauregg clinic and had the privilege of meeting Wagner von Jauregg who, although in his eightieth year, was still very alert and full of enthusiasm about his researches. His kindness and hospitality and the trouble he took in personally taking me round some of the clinics were indeed a testimony to his greatness. Though I retain vivid impressions of this visit, I am indebted to Professor Stengel of Sheffield University, who was a colleague of Wagner von Jauregg's in Vienna and has kindly written the following appreciation:

I worked under Wagner von Jauregg for more than two years before his retirement in 1927, but I saw him often afterwards, until my departure from Vienna in 1938. The political upheaval was a great blow to him because it affected many of his pupils and associates and also some members of his family. Early in 1939, he wrote to me rather sadly that he was spending much of his time reading and writing in the medical library, usually quite

alone. He was working on a book on the duration of life. In his letter, he expressed doubts whether he would ever finish this work. I do not think he did because he died in the following year.

The most remarkable thing about Wagner von Jauregg was the absence of professional pomposity and mannerisms. There was an earth-bound simplicity about him, and one always was aware that he had come from peasant stock. He was a man of few words and he spoke in a rather broad dialect. Although he appeared serious most of the time, he had a shrewd sense of humour which lit up quite unexpectedly. All this created the impression of an unusually unsophisticated man who cared very little about appearances. It was characteristic of him that he always wore the same dark blue suit of which he must have had several specimens.

As the head of the clinic, he wielded, of course, much power in the university and in psychiatry and neurology, but he used it in an unostentatious manner. He did not attempt to imprint his outlook on his subject as was the custom in most continental schools. He was a contemporary of Freud and the two had been on friendly terms when they were young. Although they became estranged later on, their relationship never became one of hostility because they respected each other.

Wagner von Jauregg who had come into psychiatry more or less by accident, as he often said himself, remained an experimental pathologist throughout his life and had little understanding for Freud's line of work. Nevertheless, he must have had an appreciation of its importance because he saw to it that, among his senior assistants, psycho-analysis was represented. This was the most remarkable feature of his clinic where all serious trends in neurology and psychiatry were represented, even those for whom he felt little sympathy.

In his private life he was extremely modest and puritanical, although he is said to have been fond of a good glass of wine. He never had a car of his own, not because he could not afford it, but because he could not be bothered. He hardly used secretarial help, and wrote most of his letters by hand. He had a great loyalty to everybody who had worked with him, and I was certainly not the only one of those who had emigrated to whom he wrote.

His success never went to his head. He never regarded himself as a genius, and often said that luck had favoured him and that his main contribution had been perseverance in following up a clue. In his autobiography, he did not claim to have been the first one to have thought of the malarial treatment.

REFERENCES

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